

**HEWLETT-PACKARD COMPANY**  
Intellectual Property Administration  
P.O. Box 272400  
Fort Collins, Colorado 80527-2400

**PATENT APPLICATION**

**ATTORNEY DOCKET NO.** 200310949-1

**Inventor(s):** Michael HARVILLE

**Confirmation No.:** 8918

**Application No.:** 10/698,111

**Examiner:** Bernard Krasnic

**Filing Date:** 10/31/2003

**Group Art Unit:** 2624

**Title:** METHOD FOR VISUAL-BASED RECOGNITION OF AN OBJECT

**Mail Stop Amendment**  
**Commissioner For Patents**  
**PO Box 1450**  
**Alexandria, VA 22313-1450**

**TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT**

Transmitted herewith is/are the following in the above-identified application:

- |  |   |
|--|---|
| <input type="checkbox"/> Response/Amendment                                      | <input type="checkbox"/> Petition to extend time to respond |
| <input type="checkbox"/> New fee as calculated below                             | <input type="checkbox"/> Supplemental Declaration           |
| <input checked="" type="checkbox"/> No additional fee                            |   |
| <input checked="" type="checkbox"/> Other Response to Examiner Interview Summary | Fee\$   |

| <b>CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY</b>                     |  |  |  |   |             |                           |
|---|--|--|--|---|-------------|---------------------------|
| (1)<br>FOR  | (2)<br>CLAIMS REMAINING<br>AFTER AMENDMENT | (3)<br>NUMBER<br>EXTRA                   | (4)<br>HIGHEST NUMBER<br>PREVIOUSLY PAID FOR | (5)<br>PRESENT<br>EXTRA                   | (6)<br>RATE | (7)<br>ADDITIONAL<br>FEES |
| TOTAL CLAIMS  | 40   | MINUS                                    | 40   | = 0                                       | X \$50      | \$ 0                      |
| INDEP. CLAIMS   | 3  | MINUS                                    | 3  | = 0                                       | X \$210     | \$ 0                      |
| <input type="checkbox"/> FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM |  |  |  |   |             | +                         |
| EXTENSION FEE   | <input type="checkbox"/> 1st Month \$120   | <input type="checkbox"/> 2nd Month \$460 | <input type="checkbox"/> 3rd Month \$1050    | <input type="checkbox"/> 4th Month \$1640 |             | \$ 0                      |
| OTHER FEES  |  |  |  |   |             | \$                        |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT                                   |  |  |  |   |             | \$ 0                      |

Charge \$0 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any over payment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

Respectfully submitted,  
Michael HARVILLE

By: /John P. Wagner, Jr./

John P. Wagner, Jr.

Attorney/Agent for Applicant(s)

Reg No. : 35,398

Date : 08/25/2008

Telephone : 408-377-0500